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CONFIRMATION NO. 1024

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | |
|---|---|-----------------------------------|----------------------------------|---|------------------------------------|
| 10/826,925 | 04/15/2004 | 600 | 3735 | 1023-350US01 | |
| RULE | | | | | |
| APPLICANTS Kenneth T. Heruth, Edina, MN; Keith A. Miesel, St. Paul, MN; ** CONTINUING DATA ***** This appln claims benefit of 60/553,783 03/16/2004 ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/26/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /PATRICIA C MALLARI/ Acknowledged Examiner's Signature | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY MN | SHEETS DRAWINGS 11 | TOTAL CLAIMS 99 | INDEPENDENT CLAIMS 8 |
| ADDRESS SHUMAKER & SIEFFERT, P. A. 1625 RADIO DRIVE SUITE 300 WOODBURY, MN 55125 UNITED STATES | | | | | |
| TITLE COLLECTING SLEEP QUALITY INFORMATION VIA A MEDICAL DEVICE | | | | | |
| FILING FEE RECEIVED 2752 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |